

EXHIBIT 28

From: Jillanne Smith </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS /CN=44F4A19F24B5452BA2E4B2FB62CD0EBB-XJSS>
To: Dain Rusk
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Please let me know if these reports I'm sending you are overkill, underkill or ok. I just want to get you what you need. I'm trying to think of things of interest to the retail leadership team and not sure if I'm hitting the mark or not. Thanks!



DVPUdate_Nov2018.docx

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PLAINTIFF TRIAL
EXHIBIT
P-01366

Operations Update – November 2018

Controlled Substance Compliance

Centralization of controlled substance compliance is important to minimize risk to Publix. We have three initiatives in progress to develop centralization of controlled substance compliance – this is an update for each:

- Suspicious Order Monitoring (SOM) –
 - We are required by the DEA to monitor each pharmacy's controlled substance orders for any unusual size, frequency or pattern. We have centralized the identification and evaluation of orders of interest to the Pharmacy Compliance Department. This Dpt. evaluates the orders for initial approval or not. Those orders not approved are investigated further to determine if it's a reportable incident or not – reportable to the DEA. It's important to note that any orders not approved are evaluated for partial orders and such to ensure we are appropriately handling customers in the process.
 - We are replacing a major component of our current order monitoring system. We have selected the vendor and are in the middle of contracting with them.
- Diversion Analytics –
 - It's our responsibility to monitor the dispensing patterns associated with controlled substances. We have partially centralized some diversion analytics in the Pharmacy Compliance Department. This effort is in it's infancy. We evaluate basic metrics that may lead us to evaluating ordering and dispensing patterns at certain locations potentially leading to an investigation of controlled substance dispensing activity. This ultimately would result in mitigation of the issue at hand, reporting to the appropriate agency if required, as well as coordination with LP as needed.
 - Within the scope of this effort we are developing a plan for prescriber license verification; however, we have determined prescriber profile clean-up is a necessary precursor. We are evaluating vendors and internal efforts to manage the integrity of our prescriber profiles, after which a license verification program will be established and successful.
- Significant Loss Reporting –
 - When a pharmacist determines that we have significant, unaccounted-for (missing) controlled substance inventory, the unaccounted-for loss must be reported to the DEA and sometimes the Board of Pharmacy within 24-hours. We are working with Operations on reporting of some of these losses at this time, but full centralization is planned for 2019, as well as coordination with LP processes.

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TIME

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Operations Update – November 2018, Continued

Controlled Substance Training

The Controlled Substance Training initiative will develop and implement a comprehensive training program for our retail staff to appropriately identify red flag prescriptions using sound judgement. This training will also provide guidance on how to have important conversations with a patient or caregiver in the event a pharmacist must decline to fill a controlled substance prescription or in the event a pharmacist feels it's in the best interest of the patient to also fill an opioid antagonistic with the prescription. We are:

- implementing two CBT courses to cover the training described above – striving to meet the 12/3 deployment schedule.
- preparing an opioid antagonistic training program in coordination with dispensing requirements based on each state's laws
- creating other job aids and supporting reference materials for ongoing reference once training is completed
- evaluating a potential vendor to provide dashboard metrics based on PDMP look-ups making it easier for our pharmacist to interpret patient dispensing history for red flags

In addition, this team is working with our Procurement Dpt. on an Rx disposal program for our customers. A couple different concepts are being evaluated in the coming few weeks for a final decision.

Centralized Inspections

Currently, inspections resulting from Board of Pharmacies or their enforcement arms, as well as other inspections such as DEA, Biomedical Waste, etc. are handled at the Pharmacy Supervisor level. The Centralized Inspections project will centralize the reporting of inspections from any agency in the field to Compliance & Regulatory Affairs for analysis, internal reporting and remediation, as well as facilitation of responses to outside agencies, as needed. This will be in coordination with Operational teams and Legal.

A new process, webform and database has been designed. We are now submitting the webform request. The database will be developed internally. Once these two are in place we can implement the process. We are expecting to implement March/April 2019.

Pharmacist Letter

We have implemented a new CE provider for our pharmacists and technicians which will provide them a variety of options to meet their CE requirements. They also have a suite of reference tools which we will consider adopting to enhance our existing job aids and references.
